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PTO/SB/21 (09-04)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| | |
|----------------------|-------------------------|
| Application Number | 10/663,359 |
| Filing Date | 09/16/2003 |
| First Named Inventor | Karandikar, Prashant G. |
| Art Unit | 1774 |
| Examiner Name | Dixon, Merrick |

Attorney Docket Number M-102-E

| ENCLOSURES (Check all that apply) | | | |
|---|--|--|---------|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): (1) Certificate of Mailing (2) Return Receipt Postcard | Remarks |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|----------------------------------|----------|--------|
| Firm Name | Law Office of Jeffrey R. Ramberg | | |
| Signature | | | |
| Printed name | Jeffrey R. Ramberg | | |
| Date | 03/15/2005 | Reg. No. | 34,700 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

| | | | |
|-----------------------|--------------------|------|------------|
| Signature | | | |
| Typed or printed name | Jeffrey R. Ramberg | Date | 03/15/2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 25.)

Complete if Known

| | |
|----------------------|----------------------|
| Application Number | 10/663,359 |
| Filing Date | 09/16/2003 |
| First Named Inventor | Karandikar, Prashant |
| Examiner Name | Dixon, Merrick |
| Art Unit | 1774 |
| Attorney Docket No. | M-102-E |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 50-1020 Deposit Account Name: Joffrey R. Ramborg

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| <u>Application Type</u> | <u>FILING FEES</u> | | <u>SEARCH FEES</u> | | <u>EXAMINATION FEES</u> | | |
|-------------------------|--------------------|---------------------|--------------------|---------------------|-------------------------|---------------------|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Small Entity</u> | <u>Fees Paid (\$)</u> |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

| <u>Small Entity</u> | |
|---------------------|-----------------|
| <u>Fee (\$)</u> | <u>Fee (\$)</u> |

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

| Total Claims 22 | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|-----------------|--------------|----------|---------------|---------------------------|
| 22 | 1 | 25. | 25. | Fee (\$) |

HP = highest number of total claims paid for, if greater than 20

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|----------|---------------|
| - 3 or HP = | x | = | | | |

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | / 50 = | (round up to a whole number) x | | = |

Fees Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

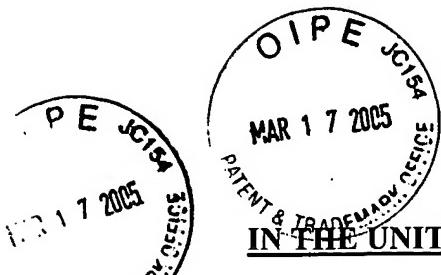
Other: _____

SUBMITTED BY

| | | | | | |
|-------------------|--------------------|--------------------------------------|--------|-----------|--------------|
| Signature | | Registration No. (Attorney/Agent) | 34,700 | Telephone | 302-454-8600 |
| Name (Print/Type) | Joffrey R. Ramborg | | | Date | 03/15/2005 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Karandikar et al.

Group Art Unit: 1774

Serial No.: 10/663,359

Examiner: Dixon, Merrick

Filed: September 16, 2003

Attorney Docket No.: M-102-E

For: Low CTE Metal-Ceramic Composite Articles, and Methods for Making Same

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Certificate of Mailing Under 37 CFR §1.8

Dear Sir:

I hereby certify that the following correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to *Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450*:

Amendment in Reply to First Office Action

Transmittal; Fee Transmittal

Return Receipt Postcard

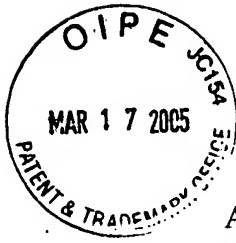
3/15/2005

Date


Signature

Jeffrey R. Ramberg

Typed or printed name of person signing Certificate



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Karandikar et al.
Serial No.: 10/663,359
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Attorney Docket No.: M-102-E
Group Art Unit: 1774
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For: Low CTE Metal-Ceramic Composite Articles, and Methods for Making Same

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT IN REPLY TO NON-FINAL OFFICE ACTION

Dear Sir:

In regard to the Office Action dated December 15, 2004, please amend the above-identified patent application as follows:

Please enter Applicants' **Amendments to the Claims**, which begin on page 2 of this letter.

Applicants' **Remarks** follow on page 6 of this paper.

03/18/2005 SFELEKE1 00000029 501020 10663359
01 FC:2202 25.00 DA